

SQAC Non-Mandated Measure Evaluation Process – Scoring Key				9/23/2013	
0		1	2	3	4
Reliability and Validity	The evidence of the measure's reliability and validity is inconclusive and/or unclear. Reliability: the measure can be implemented consistently, allows comparability, and produces results that can be repeated in the same population and time period, or Validity: the measure's specifications are consistent with evidence for the measure.	There is evidence that the measure meets each of the elements of reliability and validity, but not at the proposed level of analysis.	There is mixed evidence that the measure meets each of the elements of reliability and validity at the proposed level of analysis.	There is good evidence that the measure meets each of the elements of reliability and validity at the proposed level of analysis.	There is very strong evidence that the measure meets each of the elements of reliability and validity at the proposed level of analysis.
Ease of Measurement	No collection and reporting, or extreme resource cost to collect necessary data elements. Example of extreme resource cost: face-to-face interview	Some collection but no reporting, or high resource cost to collect necessary data elements. Example of high resource cost: chart review	Some collection and reporting, or moderate resource cost to collect necessary data elements. Example of moderate resource cost: EHR extraction	Commonly collected and reported, or low resource cost to collect necessary elements. Example of low cost: data currently reported to some entities	Data are available and already in use for public reporting, performance programs or accountability purposes.
Field Implementation	The measure has not been implemented in the field (i.e. provider practice, hospital, or plan).	The measure has been implemented in the field, but evaluation results are unavailable or inconsistent.	The measure has been implemented in the field, and evaluated positively, but not at the indicated level of analysis.	The measure has been implemented in the field, and evaluated positively.	The measure has been applied to the indicated level of analysis and used for publicly reporting, performance programs and for accountability purposes.
Amenable to Targeted Improvement	There are no evaluated interventions that can drive performance in the clinically related area and that are applicable to the level of analysis.	There are minimally-evaluated interventions that may drive performance in the clinically related area AND weak evidence that the measure is amendable to intervention at the level of analysis.	The interventions that demonstrate an impact on patient outcomes in the clinically related area have not demonstrated direct correlation with performance on the measure.	There are interventions that demonstrate an impact on performance in the clinically related area, but some have not been evaluated at the indicated level of analysis.	There is strong evidence that targeted interventions at the level of analysis can drive performance in the clinically related area.